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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORPORATE ACCESS, INC.
Account Number : FCA000000011
Phone : (850) 222-2666
Fax Number : (850) 222-1666

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
NONNO SUNSHINE SUBWAY INC.

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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Corporate Filing Menu

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L. Burch APR 11 2011

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME
The name of the corporation shall be: Nonno Sunshine Subway Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address
573 SOUTH ATLANTIC AVENUE
COCOA BEACH FLORIDA 32931

Mailing address, if different is:
573 SOUTH ATLANTIC AVENUE
COCOA BEACH FLORIDA 32931

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Sandwich shop

ARTICLE IV SHARES
The number of shares of stock is: 100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JACQUELINE TURCO - President
Address: 573 SOUTH ATLANTIC AVENUE
COCOA BEACH FLORIDA 32931

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

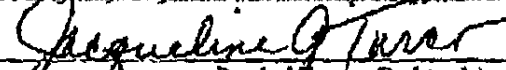
Name: JACQUELINE TURCO
Address: 573 SOUTH ATLANTIC AVENUE
COCOA BEACH FLORIDA 32931

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

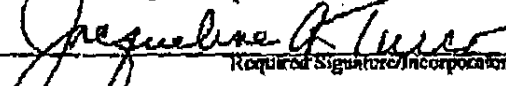
Name: JACQUELINE TURCO
Address: 573 SOUTH ATLANTIC AVENUE
COCOA BEACH FLORIDA 32931

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

* 
Required Signature/Registered Agent

04/08/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.317.155, F.S.

* 
Required Signature/Incorporator

04/08/11
Date

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